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Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Continuation-in-part (CIP)

UTILITY	
PATENT APPLICATION	١
`TRANSMITTAL	

Attomey Docket No. Taizo Yano First Inventor Synthetic Resin-made Glove and the

(Only for new nonprovisional applications under 37 CFR 1.53(b)) APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

Cross Reference to Related Applications

or a computer program listing appendix

- Brief Description of the Drawings (if filed)

Drawing(s) (35 U.S.C. 113) [Total Sheets

1.63(d)(2) and 1.33(b).

or in an Application Data Sheet under 37 CFR 1.76:

Customer Number or Bar Code Label

Application Data Sheet. See 37 CFR 1.76

Divisional

Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))

DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s)

named in the prior application, see 37 CFR

(for continuation/divisional with Box 18 compléted)

- Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table,

Total Pages

[Total Pages

Lee, Mao-Sheng

Taipei

Taiwan

Taigo Uforno

P. O. Box 55-846.

Fee Transmittal Form (e.g., PTO/SB/17)

(Submit an original and a duplicate for fee processing)

Applicant claims small entity status.

rred errangement set forth below

Descriptive title of the invention

- Background of the Invention - Brief Summary of the Invention

- Abstract of the Disclosure

- Detailed Description

See 37 CFR 1.27.

Specification

- Claim(s)

5. Oath or Declaration

Continuation

6.

Name

<u>Address</u>

City

Country

Signature

Name (Print/Type)

Express Mail Label No. Assistant Commissioner for Patents ADDRESS TO: **Box Patent Application** Washington, DC 20231 CD-ROM or CD-R in duplicate, large table Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) Sign Computer Readable Form (CRF) <u>.</u>69 b. Specification Sequence Listing on: 0 i. CD-ROM or CD-R (2 copies); or paper Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS Assignment Papers (cover sheet & document(s)) 37 CFR 3.73(b) Statement Power of 10. (when there is an assignee) Attorn v English Translation Document (if applicable) Copies of IDS Information Disclosure Citations Statement (IDS)/PTO-1449 Preliminary Amendment Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) Request and Certification under 35 U.S.C. 122 16 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, of prior application No .:_ Group Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 6b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS ert Customer No. or Atlanh har code label h Taipei 104. State Taiwan Zip Code 104 Telephone 1. Taizo Yano 2. Lee, Mao-Sheng Registration No. (Attorney/Agent)

10/29/03

Date

assen Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (12-97)
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FEE TRANSMITTAL	Application Num	nber		
	Filing Date First Named Inv	rentor laizo Yano		
Note: Effective October 1, 1997. Patent fees are subject to annual revision.	Group Art Unit			
1 OF	Examiner Name			
TOTAL AMOUNT OF PAYMENT (\$) 385	Attorney Docket	Number		
METHOD OF PAYMENT (check one)	FE	E CALCULATION (continue	(d)	
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